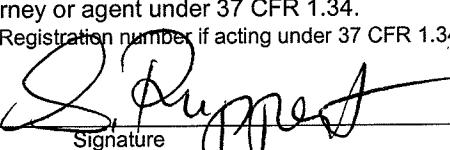


| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>   |            | Docket Number (Optional)<br>015280-377100US |
|---|------------|---|
| <b>FY 2009</b><br>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)   |            |   |
| Application Number 09/936,888   |            | Filed September 3, 2002                     |
| For PREVENTION OF FETAL ALCOHOL SYNDROME AND NEURONAL CELL DEATH WITH ADNF POLYPEPTIDES   |            |   |
| Art Unit Unassigned   |            | Examiner Olga N. Chernyshev                 |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  |            |   |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):   |            |   |
|   | <u>Fee</u> | <u>Small Entity Fee</u>                     |
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))   | \$130      | \$65  |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))   | \$490      | \$245                                       |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))   | \$1110     | \$555                                       |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))  | \$1730     | \$865                                       |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))  | \$2350     | \$1175                                      |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.<br><input type="checkbox"/> A check in the amount of the fee is enclosed.<br><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.<br><input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.<br><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>20-1430</u> .<br><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b> |            |   |
| I am the <input type="checkbox"/> applicant/inventor.<br><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br>Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).<br><input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>44,312</u><br><input type="checkbox"/> attorney or agent under 37 CFR 1.34.<br>Registration number if acting under 37 CFR 1.34 _____   |            |   |
| <br>Signature  |            | November 23, 2009                           |
| Siegfried J.W. Ruppert, Ph.D., Reg. No. 44,312<br>Typed or printed name   |            | 415-576-0200<br>Telephone Number            |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.   |            |   |
| <input type="checkbox"/> Total of _____ forms are submitted.  |            |   |